

Operational Policy Matters

February 2024

This communication will be of interest primarily to CEOs, registered managers, care managers and chairs of trustee boards.

1.0 RESPONSIBILITIES

- 1.1 Adoption of each policy by the organisation's board of trustees is an insurance requirement for those organisations insured by a company brokered through Gallaghers Insurance.
- 1.2 Trustees are personally responsible for ensuring managers have systems in place to implement the content of policy documents in their organisation
- 1.3 Managers will ensure that changes to policy, procedure and guidance documents resulting from the review process are brought to the attention of relevant staff.

2.0 REVIEWED POLICY DOCUMENTS

- 2.1 The following policies, procedures and guidance have been reviewed.
 - Data protection and subject access A03
 - Confidentiality and disclosure D05
 - Escort and Transport D02
 - Security of the home D06
 - Financial protection D07

3.0 GENERAL AMENDMENTS

- 3.1 The National Council for Voluntary Organisations' states that 'volunteers give their time, carrying out activities that aim to benefit community or society. Volunteers are unpaid and choose how they wish to give their time'. This definition has replaced the previous one and will be applied as applicable to the revised documents.
- 3.2 By March 2024 the Government is aiming for 80% of regulated providers in England to be using digital social care records (DSCRs). Likewise in Wales, the Government states that wherever possible, organisations should be moving away from paper towards digital records. In response, wording throughout the documents currently under review has been standardised to refer to electronic as well as paper-based care practice systems and records.

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- 3.3 The term ‘client report form’ has been replaced with ‘day-to-day record’ throughout the reviewed documents.

Please note: specific instances of the above changes are not individually referenced in the report below.

4.0 DATA PROTECTION AND SUBJECT ACCESS (A03)

Policy for trustees (A03a)

- 4.1 Trustees will ensure managers have effective systems in place whereby the organisation’s staff comply with the National Data Guardian’s ten data security standards (link provided) (policy 2.2).
- 4.2 Organisations in England that are regulated by the Care Quality Commission (CQC) and those delivering services under an NHS contract are required to complete the NHS Data Security and Protection Toolkit on an annual basis (policy 2.3).
- 4.3 Organisations will have systems in place to account for the personal data held by them in all formats for as long as it is held (policy 2.4)

Procedure for managers (A03b)

- 4.4 Organisations in England that provide CQC-regulated services and those providing services under an NHS contract are required complete the NHS Digital Data Security and Protection Toolkit at least annually (procedure 4.4.2)
- 4.5 Permission for individual staff members to access service users’ personal data / special categories of personal data will be removed once they no longer require that access as part of their job role (procedure 5.1).
- 4.6 A footnote has been added explaining that the handling and storage of paper-based documentation kept in a service user’s home (for example, care and support plans) is addressed in the accompanying guidance for care workers (procedure 5.2)
- 4.7 A footnote has been added that though fax machines are still in use, it is anticipated they will become obsolete by the end of 2025 (procedure 6.4).
- 4.8 Consent obtained by a manager from a service user or their representative permitting the organisation to use a photograph, video or audio footage may be recorded in paper or electronic format (procedure footnote 8.2).
- 4.9 Where electronic signatures are used, the data protection lead will ensure there is an authorisation and audit process in place to verify them (procedure 10.5.3).

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- 4.10 The data protection lead will take expert advice from a reputable professional IT specialist to clarify any aspects of electronic storage, retention or archiving as necessary (procedure 10.5.4).
- 4.11 All staff will be trained in data protection as appropriate to their role in the organisation. Training will include use of the manual / electronic / digital recording systems operated within the organisation (procedure 13.2).
- 4.12 Special category data is personal data that needs more protection because it is sensitive. According to the Information Commissioner's Office, special categories of personal data may include (in addition to the existing list) disability, pregnancy and gender reassignment in so far as these may reveal information about a person's health (procedure Appendix 1),
- 4.13 In order to lawfully process special categories of personal data, a lawful basis under Article 6 of the UK General Data Protection Regulation must be identified alongside a separate lawful condition for processing under Article 9. The two do not have to be linked (procedure Appendix 4).

Guidance for office staff / office volunteers (A03c, A03e)

- 4.14 The definition of special categories of personal data has been expanded as set out in 4.12 above (guidance for office staff, guidance for office volunteers - footnote 1.3).
- 4.15 Staff are not permitted to take or use a photograph, audio or video recording or any other such personal data of a service user unless a manager has first obtained the necessary consent from the person concerned or their representative and has given the staff member permission to do so (guidance for office staff 9.2, guidance for office volunteers 8.2).

Guidance for care staff / community volunteers (A03d, A03f)

- 4.16 The definition of special categories of personal data has been expanded as documented in 4.12 above (guidance for community staff, guidance for community volunteers - footnote 1.3).
- 4.17 Details of what needs to happen before staff can legitimately take or use a photograph, audio or video recording of a service user are documented as in 4.15 above (guidance for community staff 5.2, guidance for community volunteers 6.2).

5.0 CONFIDENTIALITY AND DISCLOSURE (D05)

Policy for trustees (D05a)

- 5.1 No changes.

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Procedure for managers (D05b)

- 5.2 Once a staff member no longer requires access to confidential information for work purposes, managers will ensure their right of access is removed (procedure 5.3).
- 5.3 Formal requests from a third party to view information about a service user may be submitted in written format or electronically (procedure – Appendix 1, section 5)

Guidance for staff and guidance for volunteers (D05c, D05d)

- 5.4 No changes

6.0 ESCORT AND TRANSPORT (D02)

Policy for trustees (D05a)

- 6.1 No changes.

Procedure for managers (D05b)

- 6.2 The generic risk matrix has been added (procedure 4.1 and Appendix 1)
- 6.3 Managers are directed to take all reasonably practicable action to ensure their staff are driving a roadworthy vehicle when carrying service users as passengers and strongly recommend that they take out reliable breakdown cover on the vehicle they use for work purposes (procedure 7.1).
- 6.4 It is recommended good practice that managers record details of a staff member's vehicle (such as make, model and registration number) that they use for work purposes, as the information may be of use in event of an emergency (procedure 7.2).
- 6.5 Some local councils and national charities provide taxicard schemes offering subsidised travel to people with disabilities (procedure 13.2).

Guidance for care workers and guidance for volunteers (D05c, D05d)

- 6.6 it is strongly recommended that staff take out reliable breakdown cover on the vehicle they use for work purposes (guidance for staff, guidance for volunteers 3.6.2).
- 6.7 Staff are advised to make sure they have enough fuel for any proposed trips or outings and know where the local petrol stations are (guidance for staff, guidance for volunteers 3.10.1).

7.0 SECURITY OF THE HOME (D06)

Policy for trustees (D06a)

- 7.1 No changes.

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Procedure for managers (D06b)

- 7.2 Staff will be instructed that, if they think they are being watched when entering a service user's home, they must escalate their concerns to their manager / person on call without delay (procedure 4.1).
- 7.3 Managers will ensure there is a robust system in place to evidence that the person with care needs / carer / family member (as appropriate) has provided the necessary consent for staff to carry keys to their home. Footnotes are provided directing readers to the autonomy and independence policy for more information on consent and to the model key holding form for managers using a paper-based system to record that consent (procedure 5.3).
- 7.4 When keys to a service user's home are held in the organisation's office, managers will ensure that staff sign for them on collection and return, in order to provide an effective audit trail of each key's location (procedure 5.4.1).

Guidance for care workers and guidance for volunteers (D06c, D0)

- 7.5 No changes.

8.0 FINANCIAL PROTECTION (D07)

Policy for trustees (D03a)

- 8.1 No changes.

Procedure for managers (D03b)

- 8.2 Staff will be trained to make a record of all cash handling / financial activities carried out with or on behalf of a person with care needs, including an entry on their day-to-day record (procedure 3.2).
- 8.3 When assessing staff involvement in handling a person's cash, if identified risks cannot be reduced to 'low' as set out in Appendix 2, the care planner / assessor will decline the service until a safe alternative is established (procedure 3.4.1).
- 8.4 The risk matrix used as standard throughout the care practice Operational Policy Framework has been added (procedure – Appendix 2).

Guidance for care workers and guidance for volunteers (D03d, D03f)

- 8.5 Staff are directed to read the organisation's gift policy alongside the financial protection guidance (guidance for care workers, guidance for volunteers 1.3).

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- 8.6 Staff are directed to keep accurate records of all cash handling or other financial activities they carry out with or on behalf of a service user (guidance for care workers, guidance for volunteers 2.1).
- 8.7 Staff are instructed never to offer financial advice or information to a service user, but rather to recommend they contact a manager in the organisation who will signpost them to relevant agencies as appropriate (guidance for care workers, guidance for volunteers 2.2)

9.0 SUMMARY OF CHANGES TO CARE PRACTICE POLICY DOCUMENTS

KEY	
✓	Changes HAVE been made
-	No changes
NA	Not applicable

Title	Ref	Policy: trustees	Procedure: managers	Guidance: staff	Guidance: volunteers
Data protection	A03	✓	✓	✓	✓
Confidentiality	D05	-	✓	-	-
Escort & transport	D02	-	✓	✓	✓
Security of home	D06	-	✓	-	-
Financial protection	D07	-	✓	✓	✓

10.0 TOOLS

- 10.1 The following guidelines and forms have been revised and updated and are provided for Network Partners to adopt / adapt as necessary so that they accurately reflect the services they provide and their local requirements.
- Cash handling form – DT05
 - Compliments and complaints documents (England) – AT03
 - Guidelines on the use of motor vehicles – AT04
 - Incident report form – DT03
 - Key holding authority form – DT04
 - Model missing person policy – AT18
 - Permission to share information (adults) – BT10
 - Permission to share information (children) – CT10
 - Permission to use photographs (adults) – BT09
 - Permission to use photographs (children) – CT09
 - Social outings risk assessment – FT09
 - Subject access form – AT20a
 - Third party request form – AT20b
 - Model privacy notice – AT20c
 - Template data processing agreement – AT20d

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Please direct queries regarding the documents above to the dedicated helpline at CareOPFhelpline@carers.org where they will be addressed on a weekly basis.

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